PTO/SB/17 (05-07)

Approved for use through 05/31/2007. OMB 0651-0032

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Effective on 1/2/09/2004

Effective on 12/08/2004.		Complete if Known				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Application Number 10/624,795-Conf. #7470				
FEE TRANSMITTAL		Filing Date	,	July 22, 2003		
For FY 2007		First Named Inv		Alastair M. Hodges		
		Examiner Name		A. S. Noguero	ola	
Applicant claims small entity status. See 3	7 CFR 1.27	Art Unit		1753		
TOTAL AMOUNT OF PAYMENT (\$)	790.00	Attorney Docket i	No.	104978-0007		
METHOD OF PAYMENT (check all that a	pply)					·
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x Deposit Account Deposit Account Number: 1	41449 Deposit Acc	ount Name:	Nutter	McClennen &	& Fish LLP	
For the above-identified deposit acco	unt, the Director is	hereby authorize	d to: (chec	k all that apply)	
x Charge fee(s) indicated below		Charge	e fee(s) ind	licated below, e	except for the	filing fee
Charge any additional fee(s) or fee(s) under 37 CFR 1.16 and		x Credit	any overpa	ayments		
FEE CALCULATION						
1. BASIC FILING, SEARCH, AND EXAMINA			= V			
FILING FI Sma	ES SEA Il Entity	ARCH FEES Small Entity	EXAMIN	IATION FEES Small Entity	•	
	ee (\$) Fee (\$		Fee (\$)	Fee (\$)	Fees Pa	id (\$)
Utility 300	150 500	250	200	100		
5	100 100	50	130	65		
	100 300	150	160	80		
	150 500	250	600	300		
Provisional 200	100 0	0	0	0		
2. EXCESS CLAIM FEES					<u>S</u> Fee (\$)	mall Entity Fee (\$)
Fee Description Each claim over 20 (including Reissues)					50	25
Each independent claim over 3 (including Ressues)	issues)				200	100
Multiple dependent claims					360	180
Total Claims Extra Claims Fee (S) Fee F	aid (\$)	<u>M</u> :	ultiple Depend	ent Claims	
×	_ =	, , ,	Fe	e (\$)	Fee Paid (\$)	
HP = highest number of total claims paid for, if greater	than 20.					_
Indep. Claims Extra Claims Fee () Fee F	Paid (\$)				
X						
HP = highest number of independent claims paid for, if	greater than 3.					
3. APPLICATION SIZE FEE If the specification and drawings exceed 10 listings under 37 CFR 1.52(e)), the appli sheets or fraction thereof. See 35 U.S.C	cation size fee du	e is \$250 (\$125 fo				
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) - 100 = /50 = (round up to a whole number) x				Fee P	aid (\$)	
4. OTHER FEE(S)					Fees P	aid (\$)
Non-English Specification, \$130 fee (no		•				
Other (e.g., late filing surclarge): 1801	Request for cont	inued examinat	ion (RCE) (see 37	790	0.00
SUBMITTED BY						
Signature My P. Loyn		Registration No. (Attorney/Agent) 49,052		Telephone	(617) 439-2000	
Name (Print/Type) Michael P. Doyle		- W		Date	June 12,	2007
1						

		Fee Transmittal per referred to as being attached or e date shown below in an envelope a 150, Mexandria, NA 2213-13-1450.	enclosed) is being deposited with the U.S. Postal Service as addressed to:
Dated: June 12, 2007	Signature:	May 1. Voya	(Michael P. Doyle)

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/624,795-Conf. #7470
Filing Date .	July 22, 2003
First Named Inventor	Alastair M. Hodges
Art Unit	1753
Examiner Name	A. S. Noguerola
Attorney Docket Number	104978-0007

ENCLOSURES (Check all that apply) After Allowance Communication x | Fee Transmittal Form Drawing(s) to TC Appeal Communication to Board of Licensing-related Papers Fee Attached Appeals and Interferences Appeal Communication to TC Amendment/Reply Petition (Appeal Notice, Brief, Reply Brief) Petition to Convert to a After Final Proprietary Information Provisional Application Power of Attorney, Revocation Affidavits/declaration(s) Status Letter Change of Correspondence Address Other Enclosure(s) (please Extension of Time Request Terminal Disclaimer Identify below): Return Receipt Postcard **Express Abandonment Request** Request for Refund Copies of 9 Foreign Patent Documents CD, Number of CD(s) x Information Disclosure Statement Copies of 18 Non Patent Literature Documents Certified Copy of Priority Landscape Table on CD Request for Continued Examination Document(s) Reply to Missing Parts/ Remarks Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name & FISH LLP Signature Printed name Michael P. Doyle Date Reg. No. June 12, 2007 49,052

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Dated: June 12, 2007	Signature: (Michael P. Doyle)	
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Application No. (if known): 10/624,795

Attorney Docket No.: 104978-0007

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IDS (Citation) by Applicant (3 pages, including Cert. of Mailing) 9 Foreign Patent Documents

40 New Detect Literature December

18 Non Patent Literature Documents

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